

# Industrial Tax Exemption Program Partial Transfer of Ownership to New Company - (Pre Executive Order)

**Project ID:** 20151877-ITE

**Date Received:** 7/31/2019

## PROJECT INFORMATION

**Company:** Bollinger Shipyards LLC  
**Project Name:** General equipment additions  
**Project Location:** 606 Ford Industrial Road , Ameilia, LA, 70340  
**Parish:** St. Mary  
**City Limits?:** --

## REQUEST PARTIAL TRANSFER OF OWNERSHIP

**New Company Name:** BOLLINGER ALGIERS LLC  
**Fiscal Year (Month/Day):** 12/31  
**NAICS Code:** 336611  
**Bollinger Shipyards LLC** \$2,252.00      **BOLLINGER ALGIERS LLC is transferred:** \$7,980,000.00  
**retains:**

### Explain the reason for change in ownership:

Asset was moved from St. Mary location to Orleans location for increased utilization

**Effective Date of Change:** 5/15/2017

This instrument will be considered by the undersigned as an amendment to the contract accepting this amendment when it has been approved and executed by the State through an authorized representative of the Board of Commerce and Industry.

## FEES

**Assessed Fee:** \$250.00  
**Amount Due:** \$0.00

## ATTACHMENTS

Document Type	Document Name	Date

## PAYMENTS

Fee Type	Amount Paid	Date Received	Confirmation #	Transaction Type
Fee Type	Amount Paid	Date Received	Confirmation #	Transaction Type

## PROJECT CONTACTS

Contact First Name	Contact Last Name	Email Address	Company Name	Mailing Address	Phone Number	Contact Type
Elaine	Leboeuf	elainel@bollingershipyards.com	Bollinger Shipyards, LLC	PO Box 250 , Lockport, LA, 70374	(985) 532-2554	Business
CRAIG	ROUSSEL	craigR@bollingershipyards.com	BOLLINGER SHIPYARDS LLC	PO BOX 250 , LOCKPORT, LA, 70374	(985) 532-2554	Business Signatory

## CONTRACT SIGNATORY

The contract signatory will be used when signing contracts. The contracts will be signed online and will take place after the board approves a form.

Title: EVP & CAO

First Name: CRAIG P

Last Name: ROUSSEL

Email Address: CraigR@BollingerShipyards.com

## CERTIFICATION STATEMENT

I hereby certify that this project meets all Constitutional, statutory and regulatory provisions applicable to this program. I hereby certify that the information provided in this document and additional materials is true and correct and that I am aware that my submission of any false information or omission of any pertinent information resulting in the false representation of a material fact may subject me to civil and/or criminal penalties for filing false public records (R.S. 14:133) and/or forfeiture of any tax benefits approved under this program. I understand that the application and information submitted shall not be returnable to the applicant.

## FORM SIGNATURE

I, Craig P. Roussel

, approve the above information.

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